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United States Bankruptcy Court for the:

Northern District of Illinois

Case number (If known):

Chapter you are filing under:
Chapter 7
Chapter 11
Chapter 12
Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERM DISTRICT OF ILLINOIS

APR 0 5 2016

JEFFREY P. ALLSTEADT, CLERK

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
1		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		·
	Write the name that is on your government-issued picture	TYEASHAY	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	BISHOP	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
rinilatabek	ampinantaningan kangangan pangangan pangangan kangangan pangangan pangangan pangangan pangangan pangangan pang Pangangan pangangan		
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>0</u> <u>3</u> <u>2</u> <u>1</u>	xxx xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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TYEASHAY BISHOP

Debtor 1

Debtor 1 I Y EASTAY First Name Middle N		Case number (if known)
Lest ranke Availle i	uanie Last Marne	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
Where you live	entidação vinte también de distinuidad de interestações pous a la provinción de side de desando antido e April en prior de desindo distinuidad un estado pleus com releado para escriptor de la companya de la compa	If Debtor 2 lives at a different address:
	7405 S VINCENNES	
	Number Street	Number Street
	CHICAGO IL 60621	
	City State ZIP Code	City State ZIP Code
	COOK County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing	лекситовлявання до положення се положення разделення до положення до	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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De	btor 1 TYEASHAY I	BISHOI	Last Nar	ne		Case number (#	f known)
Pa	art 2: Tell the Court Abo	ut Your	Bankru	ptcy Case			
7.	The chapter of the Bankruptcy Code you	Check for Ban	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	are choosing to file under	Cha	apter 7				
		☐ Cha	apter 11	1			
		☐ Cha	apter 12	<u>!</u>			
nveton-sits.	Sthein World Mandanahara (America)	☑ Cha	apter 13	,			
8.	How you will pay the fee	loca you sub with	al court rself, you mitting a pre-p ed to p	for more details about lou may pay with cash, on your payment on your louring address.	how you i cashier's behalf, yo ents. If yo	may pay. Typica check, or money our attorney may ou choose this o	neck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is pay with a credit card or check ption, sign and attach the ents (Official Form 103A).
		By I less pay Cha	quest tl aw, a ju than 1: the fee	hat my fee be waived udge may, but is not red 50% of the official pove	(You may quired to, erty line th choose ti	request this op waive your fee, at applies to you nis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the
	Have you filed for bankruptcy within the	☐ No		Nontien			
	last 8 years?	2 Yes.	District	NORTHERN IL	When	02/05/2016 MM / DD / YYYY	_ Case number 16-03532
			District	NORTHERN IL	When	11/21/2015	Case number
						MM/ DD/YYYY	
			District		When	MM / DD / YYYY	Case number
10. 4	Are any bankruptcy	☑ No	mikeforeningingerngerg son serve	, St. All rich für für hälterem harragen vorst istal vielle hal konforer vorsummere situlari ist kunden ist.	<u> </u>		
(cases pending or being filed by a spouse who is		Debtor				Relationship to you
! !	not filing this case with you, or by a business partner, or by an affiliate?						Case number, if known
			Debtor				Relationship to you
				**************************************			Case number, if known
1. Ç	Oo you rent your residence?	☐ No. ☑ Yes.	residen	ur landlord obtained an ev ce?	riction judg	ment against you	and do you want to stay in your
			☐ Yes	bankruptcy petition.	About an E		Against You (Form 101A) and file it with

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Debtor	1 TYEASHAY E	BISHOP The Last Name	Case number (if known)
Part :	Report About Any I	Businesses You Own as	a Sole Proprietor
of bu	e you a sole proprietor any full- or part-time siness?	☑ No. Go to Part 4. ☐ Yes. Name and location	of business
bus ind sep	sole proprietorship is a siness you operate as an ividual, and is not a parate legal entity such as orporation, partnership, or	Name of business, if	any
If ye sole sep	ou have more than one e proprietorship, use a parate sheet and attach it his petition.	City	Chris 7/D Cod-
		Oily	State ZiP Code
			ate box to describe your business:
			siness (as defined in 11 U.S.C. § 101(27A))
			eal Estate (as defined in 11 U.S.C. § 101(51B)) s defined in 11 U.S.C. § 101(53A))
		_	ker (as defined in 11 U.S.C. § 101(6))
		None of the abo	- ` ` `
Cha Bar are del For bus	e you filing under apter 11 of the nkruptcy Code and you a small business otor? a definition of small iness debtor, see U.S.C. § 101(51D).	can set appropriate deadline most recent balance sheet, any of these documents do a No. I am not filing under Chapter No. I am filing under Chapter Bankruptcy Coo	apter 11, but I am NOT a small business debtor according to the definition in e.
		Yes. I am filing under Ch Bankruptcy Code.	apter 11 and I am a small business debtor according to the definition in the
Part 4	: Report if You Own o	or Have Any Hazardous F	Property or Any Property That Needs Immediate Attention
propalle alle of in ider pub	you own or have any perty that poses or is ged to pose a threat mminent and ntifiable hazard to lic health or safety?	☑ Yes. What is the hazard	?
proj imm For e peris that	do you own any perty that needs nediate attention? example, do you own shable goods, or livestock must be fed, or a building needs urgent repairs?	If immediate attent	ion is needed, why is it needed?
J.a.	noods argent repairs:	Where is the prope	nty? Number Street
			City State ZIP Code

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Debtor	1

TYEASHAY BISHOP

st Name Middle Name Last N

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

;

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me

ability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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D	ebtor 1 IYEASHAY I First Name Middle Na	BISHOP me Last Name	Case	e number (if known)		
P	art 6: Answer These Que	estions for Reporting Purpose	es			
16	. What kind of debts do	16a. Are your debts primari as "incurred by an individua	ily consumer debts? Co	nsumer debts are mily, or household	defined in 11 U.S.C. § 101(8)	
	you have?	No. Go to line 16b. Yes. Go to line 17.		,,		
		 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 				
		16c. State the type of debts you	owe that are not consumer of	debts or business	debts.	
17.	. Are you filing under Chapter 7?	No. I am not filing under Cha	apter 7. Go to line 18.		- menenganan kalan-unta-mahalan-di sepanan kalandaran sepanan kalandaran sepanan kalandaran sepanan sepanan kalandaran kalandaran kalandaran kalandaran kalandaran kalandaran kalandaran	
10.00	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses No	r 7. Do you estimate that aft are paid that funds will be a	er any exempt pro available to distribu	perty is excluded and te to unsecured creditors?	
18.	How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 i	llion C	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 r	lion Lillion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	rt 7: Sign Below	I have examined this petition, and	I declare under penalty of p	periury that the info	ormation provided is true and	
For you		correct. If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7.	oter 7. I am aware that I may	oroceed if eligible	e under Chanter 7 11 12 or 12	
		If no attorney represents me and I this document, I have obtained an	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with	the chapter of title 11, Unite	d States Code, sp	ecified in this petition.	
			ment, concealing property, o in fines up to \$250,000, or in	r obtaining money	or property by fraud in connection	
		Signature of Debtor 1) ister &	Signature of Deb	otor 2	
		Executed on 04/04/2016 MM / DD / YYY	YY -	Executed on	1 / DD /YYYY	

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Debtor 1 TYEASHAY B First Name Middle Nam	e Last Name	Case number (# known)				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligible proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debto the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have nowledge after an inquiry that the information in the schedules filed with the petition is incorrect.				or(s) about eligibility ed the relief ered to the debtor(s)	
	Signature of Attorney for Debtor	Date	MM	1	DD	/ YYYY
	Printed name	***************************************				
	Firm name					
	Number Street	***************************************	 	***************************************	 -	
	City	State	ZIP C	ode		
	Contact phone	Email address				
	Bar number	State				
		La sur a versa de la companya de la				

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TYEASHAY BISHOP

Case number (if known)

For you if you are filing this bankruptcy without an attorney

Middle Name

Debtor 1

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

hired an a successfu Bankrupto	ide to file without an attorney, the court expertorney. The court will not treat you differently l, you must be familiar with the United States by Procedure, and the local rules of the court r with any state exemption laws that apply.	because you are filing for yourself. To be Bankruptcy Code, the Federal Rules of
Are you a conseque ☐ No ☑ Yes	ware that filing for bankruptcy is a serious act nces?	tion with long-term financial and legal
Are you a	ware that bankruptcy fraud is a serious crime or incomplete, you could be fined or impriso	and that if your bankruptcy forms are ned?
∠2 No □ Yes. No	ly or agree to pay someone who is not an atte ame of Person_ tach Bankruptcy Petition Preparer's Notice, Dec	orney to help you fill out your bankruptcy forms?
have read attorney m	here, I acknowledge that I understand the ris and understood this notice, and I am aware t ay cause me to lose my rights or property if I	hat filing a bankruptcy case without an do not properly handle the case.
Signatule o	Debtor 1./ V 0 04/04/2016	Signature of Debtor 2
Date	MM / DD / YYYY	Date MM / DD / YYYY
Contact phor	e	Contact phone
Cell phone	(224) 310-8063	Cell phone
Email addres	S	Email address

Fill in this i	nformation to ide	entify your case:	and the second s
Debtor 1	TYEASHAY	BISHOP	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing) First Name	Middle Name	Last Name
United States	Bankruptcy Court for	or the: Northern District of Illin	nois
Case number			
	(If known)	777111111111111111111111111111111111111	_

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
ia. 30py mile 30, Fotal Fota Ostale, IIOM Ochequie A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 34,039.00
1c. Copy line 63, Total of all property on Schedule A/B	\$34,039.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$8,357.20
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 30,153.20
Your total liabilities	\$38,510.40
art 3: Summarize Your Income and Expenses	·
Schedule I: Your Income (Official Form 106I)	\$ 2,300.00
Copy your combined monthly income from line 12 of Schedule I	\$ 2,300.00
Schedule J: Your Expenses (Official Form 106J)	0.005.00
Copy your monthly expenses from line 22c of Schedule J	\$2,225.00

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Debtor 1 TYEASHAY BISHOP First Name Middle Name Last Name Case number (# known)	

Pa	art 4: Answer These Questions for Administrative and Statistical Records				
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form Yes	m to the court with your other	schedule	s.	
7.	What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an infamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of this form to the court with your other schedules.	es. 28 U.S.C. § 159.		de major de destrucción en en en entre en en entre en en	octo-Attorney
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly inco Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	me from Official	\$	2,639.00	lang part ang part
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	An esta			
	From Part 4 on Schedule E/F, copy the following:	Total claim			
	9a. Domestic support obligations (Copy line 6a.)	\$			
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$			
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$			
	9d. Student loans. (Copy line 6f.)	\$			
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$			
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$			- The state of the
	9g. Total. Add lines 9a through 9f.	s0.00			

United States Bankru Case number	uptcy Court for the:	Northern District of It	linois	
Official For	rm 1064/F	2		☐ Check if this is an amended filing
		<u>₃</u> Property	_	

es. Where is the property? Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured clause amount of any secure Creditors Who Have Clair	ed claims on Schedule D
	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of t portion you own?
	Land	\$	\$
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		·
County	Debtor 1 only Debtor 2 only	194941	
•	Debtor 1 and Debtor 2 only	☐ Check if this is community property	
	real contract of the contract	(see instructions)	
	At least one of the debtors and another Other information you wish to add about this it property identification number:	em, such as local	
own or have more than one, list here: Street address, if available, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule E ns Secured by Property
Street address, if available, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	em, such as local Do not deduct secured cla the amount of any secure	d claims on Schedule E ns Secured by Property
	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule I ns Secured by Property Current value of t
Street address, if available, or other description City State ZIP Code	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule I ns Secured by Property Current value of t portion you own? \$
Street address, if available, or other description City State ZIP Code	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$	d claims on Schedule I ns Secured by Property Current value of t portion you own? \$
Street address, if available, or other description City State ZIP Code	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$	d claims on Schedule I ns Secured by Property Current value of t portion you own? \$
Street address, if available, or other description City State ZIP Code	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$	d claims on Schedule I ns Secured by Property Current value of t portion you own? \$ If your ownership simple, tenancy by e estate), if known.

Case 16-11605 Doc 1 Filed 04/05/16 Entered 04/05/16 09:13:21 Document Page 12 of 53 TYEASHAY BISHOP Debtor 1 Case number (if know Middle Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land Investment property City ZIP Code Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No 2 Yes MERCEDES Who has an interest in the property? Check one. Make: 3.1 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: **TRUCK** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2012 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 37000 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 12,547.00 29,189.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Make: 3.2 Do not deduct secured claims or exemptions. Put

Model:

Year:

Approximate mileage:

Other information:

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

Debtor 1 only

Debtor 2 only

instructions)

Current value of the

portion you own?

the amount of any secured claims on Schedule D:

Creditors Who Have Claims Secured by Property.

Current value of the

entire property?

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Last Name

Document Page 13 of 53 TYEASHAY BISHOP
First Name Middle Name

Case number (if known)_

.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Pur
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule L
	Year:	Debtor 2 only	Creditors who have Cial	rns Securea by Property
		Debtor 1 and Debtor 2 only	Current value of the	Current value of t
	Approximate mileage:	 At least one of the debtors and another 	entire property?	portion you own?
	Other information:	resonance, [7]	¢	\$
		☐ Check if this is community property (see instructions)	Ψ	a
4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. Pu
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	and the second s	ne de la companya de
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of to portion you own?
		At least one of the debtors and another	and property.	polition you out
	Other information:	Check if this is community property (see instructions)	\$	\$
am No	ples: Boats, trailers, motors, persona o	s and other recreational vehicles, other vehicles, and access al watercraft, fishing vessels, snowmobiles, motorcycle accesso		
no Ye	ples: Boats, trailers, motors, persona o	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		d claims on Schedule E ns Secured by Property Current value of t
No Ye	oles: Boats, trailers, motors, persona o es Make: Model: Year:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the	d claims on Schedule E ns Secured by Property Current value of t
no Ye	oles: Boats, trailers, motors, persona o es Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule Das Secured by Properly Current value of t portion you own?
am No Ye	oles: Boats, trailers, motors, personal oles Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$	d claims on Schedule Das Secured by Properly Current value of t portion you own? \$
am No Ye	oles: Boats, trailers, motors, personal es Make: Model: Year: Other information: own or have more than one, list here	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured	d claims on Schedule Ens Secured by Properly Current value of t portion you own? \$
No Ye	oles: Boats, trailers, motors, personal es Make: Model: Year: Other information: own or have more than one, list here	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clathe amount of any securer Creditors Who Have Clain	d claims on Schedule Ens Secured by Property Current value of t portion you own? \$
No Ye	oles: Boats, trailers, motors, personal bes Make: Model: Year: Other information: own or have more than one, list here Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured	d claims on Schedule Lens Secured by Property Current value of t portion you own? \$
vou	oles: Boats, trailers, motors, personal bis Make: Model: Year: Other information: own or have more than one, list here Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the	d claims on Scheens Secured by Pro Current value portion you of secured by Pro ims or exemptions of claims on Scheens Secured by Pro Current value

5.

Debtor 1

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Debtor 1

TYEASHAY BISHOP First Name

Middle Name

Last Name

Case number (if known)

Part 3:	Describe You	ır Personal and Household Items		
Do you		egal or equitable interest in any of the following items?	Current val portion you Do not deduct or exemptions	own? secured claims
		furnishings nces, furniture, linens, china, kitchenware		•
		SOFA AND BED	\$	300.00
7. Elec	nples: Televisions collections;	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games	and.	
		TV AND DVD PLAYER	\$	300.00
Exan	stamp, coin,		\$	
Exan	and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments]	
			\$	
☑ N	nples: Pistols, rifles	shotguns, ammunition, and related equipment	•	
	es. Describe		\$	· · · · · · · · · · · · · · · · · · ·
11. Cloth Exan	nples: Everyday clo	thes, furs, leather coats, designer wear, shoes, accessories		
2 Y	es. Describe	WOMEN AND CHILDREN CLOTHES	\$	500.00
12. Jewe Exam	ples: Everyday jew gold, silver	relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
=	o es. Describe		\$	
Exam	arm animals uples: Dogs, cats, b		_v a	
Ø N □ Y	o es. Describe		\$	Market and the second
		household items you did not already list, including any health aids you did not list		
	o es. Give specific formation		\$	
	he dollar value of art 3. Write that nu	all of your entries from Part 3, including any entries for pages you have attached	\$	1,100.00

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Debtor 1

TYEASHAY BISHOP

Last Name

Case number (if known)

Do you own or have an	y legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your hor	ne, in a safe deposit box, and on	hand when you file your netition	
□ No	, ,	or a said suppose sor, and on	nana whon you me your peason	
☑ Yes			Cash:	\$
7. Deposits of money Examples: Checking, and other s	savings, or other financial accou similar institutions. If you have m	unts; certificates of deposit; share: uttiple accounts with the same in:	s in credit unions, brokerage houses stitution, list each.	1
☑ No ☐ Yes				
□ res		Institution name:		
	17.1. Checking account:			\$
	17.2. Checking account:	4-9100-		\$
	17.3. Savings account:		- particular and the second se	\$
	17.4. Savings account:	***************************************		\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:	***************************************	9 - 19 - 19 - 19 - 19 - 19 - 19 - 19 -	\$
	17.9. Other financial account:		- 1000000000000000000000000000000000000	\$
	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accour	nts	
				\$
			3 8 9 4 9 6 7 m m	\$
				\$
	tock and interests in incorpor	ated and unincorporated busin	esses, including an interest in	
. Non-publicly traded s an LLC, partnership, a	and joint venture			
an LLC, partnership, a	and joint venture Name of entity:		% of ownership:	
an LLC, partnership, a No Yes. Give specific	and joint venture Name of entity:		0% %	\$
an LLC, partnership, a	and joint venture Name of entity:		0%	\$ \$

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Debtor 1	TYEASHA'	Y BISHOP	Case number (Victoria)	
,	First Name	Middle Name	Last Name Case number (if known)	
			her negotiable and non-negotiable instruments	
Negotiai Non-nec	ble instruments potiable instrum	include personal ch ents are those you o	ecks, cashiers' checks, promissory notes, and money orders. annot transfer to someone by signing or delivering them.	
		,	Signing of Controlling Ment.	
☑ No	Give specific	Issuer name:		
infor	mation about	iedadi Hailid.		_
tnem	l	· · · · · · · · · · · · · · · · · · ·		\$
				\$
				\$
. Retirem	ent or pension	accounts		
			401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	i.
☑ No				
	List each unt separately.	Type of account:	Institution name:	
4000	on ooparatory.			
		401(k) or similar plan		\$
		Pension plan:		\$
		IRA:		\$
		Retirement account:		\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		_
				\$
Your sha	deposits and parties of all unused as: Agreements wees, or others	deposits you have	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications	
☐ Yes	***************************************	ir	stitution name or individual:	
		Electric:		\$
		Gas:		\$
		Heating oil:		\$
		Security deposit on re	ntal unit:	\$
		Prepaid rent:		\$
		Telephone:		•
		Water:		\$
		Rented furniture:		. ¢
		Other:		\$ \$
				\$
Annuities	(A contract for	a periodic payment	of money to you, either for life or for a number of years)	
Z No			and the second of the second of yours)	
	*******	Issuer name and des	scription:	
				\$
				\$
				\$

Desc Main

Case number (if known)_

Case 16-11605	DOC T	Filea 04/05/16	Entered 04/05/16 09:13:21	L
		Document	Page 17 of 53	
TYEASHAY BISHO	P		Case number (if known)	

First Name Middle Name	Last Name	Odse Hamber (# Nown)	
24. Interests in an education IRA, in an ac 26 U.S.C. §§ 530(b)(1), 529A(b), and 52 ✓ No		r under a qualified state tuition program.	
m	name and description. Separately file the	ne records of any interests.11 U.S.C. § 521	(c):
			\$
			\$
VANDET BETTER DE LE CONTROL DE	199019100000000000000000000000000000000		\$
25. Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed i	n line 1), and rights or powers	
☑ No	conference which is a simple of the conference o		
☐ Yes. Give specific	mentangan pada pada panjan ng periodic pada pada pada pada pada pada pada pad		**************************************
information about them	T Let Miller 1 il 1 kilo et sein, en valendaren samuer i norman yan, ennervangerine 3 september 1 kilosok kalabak kala		\$
26. Patents, copyrights, trademarks, trade Examples: Internet domain names, webs			
No Yes. Give specific		1.51% material and approximate the second state of the second	
information about them			\$
de maring the secret of the control	enterminent word from the history of the heavy of the hea		
 Licenses, franchises, and other general Examples: Building permits, exclusive lice 		liquor licenses, professional licenses	
No processing			toname _e
Yes. Give specific information about them			\$
Account of the contract of the			
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you			
Yes. Give specific information	IRS REFUND	Federal:	s 3,000.00
about them, including whether you already filed the returns	ING NEI OND		\$ 750.00
and the tax years.		State: Local:	s 0.00
		I Palacina () (Marko - Architector A accidental de anacemanica accidental a	Ψ
29. Family support Examples: Past due or lump sum alimony	, spousal support, child support, mainter	nance, divorce settlement, property settleme	ent
☑ No			
Yes. Give specific information			
		Alimony:	\$
		Maintenance:	\$
		Support:	\$
		Divorce settlement:	\$
		Property settlement:	\$
 Other amounts someone owes you Examples: Unpaid wages, disability insure Social Security benefits; unpai 	ince payments, disability benefits, sick p d loans you made to someone else	ay, vacation pay, workers' compensation,	
☑ No			
☐ Yes. Give specific information			
	A completed the state of the st		\$
	The state of the s		era r

Debtor 1

Case 16-11605 Doc 1 Filed 04/05/16 Entered 04/05/16 09:13:21 Document Page 18 of 53 TYEASHAY BISHOP Debtor 1 Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☑ No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information...... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **V** No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 2 No Yes. Describe each claim..... 35. Any financial assets you did not already list 2 No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 3.750.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No. ☐ Yes. Describe... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices **2** No ☐ Yes. Describe.

Debtor 1		AY BISHO		Filed 04/05/16 Document	Entered 04/05/16 (Page 19 of 53		
	First Name	Middle Name	Last	Name	Case Humber (// x	nown)	
0. Machin e	ery, fixtures, e	equipment, s	upplies you	ı use in business, and to	ools of your trade		
	. Describe						\$
1. Inventor	-	t - Farth Agrandedd Sparke 115 y 12 agus 124 B Straibe d'Arthu	मार्थ न गोर्थामंत्रिकुर्ण होंगे हावक क्षित्री सम्बद्ध के स्थान करेंगे स्थान करेंगे स्थान करेंगे स्थान करेंगे स		and the state of t	and the state of t	- mann-station and
☐ Yes.	Describe	hadd an air a san a san dan air a san air an air a san air a	Arrestron Bankon de Major de Arrestro		million was a state of the fact of the second control of the secon		\$
☑ No	s in partnersh	ips or joint v	ventures			TATAN TANÀN MANANCANA MANANCANA MANANCANA MANANCANA MANANCANA MANANCANA MANANCANA MANANCANA MANANCANA MANANCAN	man and a state of the state of
☐ Yes.	Describe	Name of ent	ity:			% of ownership	:
				N=04-00-00-00-00-00-00-00-00-00-00-00-00-0	THAT THE TAXABLE TO T	%	\$
						%	\$
						%	4
No Yes.	Do your lists No Yes. Desc	include per	,	tifiable information (as	defined in 11 U.S.C. § 101(41A))	?	
			endendenden V der alle mild skille skille Avenders og over				\$
☑ No	iness-related Give specific	property you	u did not alr	eady list			otherwoods
	nation						\$
					**************************************		\$
							\$
			~~~~	* ************************************		·	\$
							\$
Add the for Part 5	dollar value o 5. Write that n	f all of your umber here	entries from	ı Part 5, including any e	ntries for pages you have atta	ched	\$
rt 6:	<b>Describe Ar</b> If you own or	ı <b>y Farm- ar</b> have an inte	i <b>d Comme</b> rest in farm	rcial Fishing-Related land, list it in Part 1.	Property You Own or Have		
Mo. G	wn or have ar so to Part 7. So to line 47.	ny legal or e	quitable inte	erest in any farm- or con	nmercial fishing-related proper	ty?	and the second s
□ Yes. (	30 to line 47.						Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fis	sł
-----------------------------------------------	----

☑ No

		Vec .		
S.	_	163		
<b>s</b>			j	
S				
S S				_
				\$

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Debtor 1	TENOTAL DIOLOT	····		Case number (if known)	
	First Name Middle Name Łast Name			-	
48 Crons—eit	her growing or harvested				
<b>Z</b> No	incl. growing of harvested				
🚨 Yes. Gi	ve specific		and the second s	то по при	Na destruction of the second o
informa	tion.		Hitche Madical and control Manufacture according pages and	enements to the state of the st	\$
	ishing equipment, implements, machinery, fixtu	ires, and to	ools of trade		
☑ No ☐ Yes	get Amerika da da da ana mangka pangka da ana sa sa sa mana da sa manana na maga mangka sa sa sa sa sa sa sa sa	die auf Austria unterminischen der der der der philosophika genet gerapp ge		employ korerus sastras (sastravoks katala kidakka katala kukuluk konin da Manifer da da asala katala sa da sas	-volument
<b>—</b> 103	A MANAGEMENT OF THE PROPERTY O				e
20 Fauna and 6	The second secon	the artis of control of the ordinal parts and control of the part of group of	t v o o при ост от	enneugeleich wird der sein werden der	
50. <b>Farm and 1</b> No	ishing supplies, chemicals, and feed				
Yes	Annual and the second company of the second district and district and the second control of the second control	parte primer enganties cumulant primeros	-фолбунду - т-т-тбог дос-болого из свойнованей избила избила избила избила избила избила избила избила избила	m. An jang-production benches tracker as it from a security and assessment of the least of the l	haludda)
					<b>S</b>
51. Anv farm- a	and commercial fishing-related property you did			т түрүү түзүнү бүзү байдай айганда 120т-йо ин-мененин мененин мененин мүрүү бүрүү оруунун анынын кана 197 онын	
<b>☑</b> No			-		
Yes. Gi	ve specific	and the second section of the second	т « дин « в по потого от то то поставность и поставущицию вы	k telovik k monoleonov, in sus s seriora degogogo s serioratega y netosum (sin pig pis det set han hambarararararararararararararararararara	and closed a
шина	HUIT.	approximation of the state of t			<u>\$</u>
52. Add the do	llar value of all of your entries from Part 6, inclu	ıding any e	entries for pages	s you have attached	\$
for Part 6.	Write that number here			······	
Part 7: Do	escribe All Property You Own or Have	e an Inte	rest in That	You Did Not List Above	
ro Da man han					
Examples: Se	re other property of any kind you did not alread eason tickets, country club membership	y iist?			
🛭 No					
Yes. Given	ve specific				\$
HHQIFIA	901				\$
		that one are and a more entering engagement			\$
54. Add the do	lar value of all of your entries from Part 7. Write	that numb	er here	<b>→</b>	\$
Part 8: Li	st the Totals of Each Part of this For	m			
55. Part 1: Tota	i real estate, line 2			<b>-</b>	: <b>\$</b>
	l vehicles, line 5		28,189.00		
		\$		-	
7. Part 3: Tota	personal and household items, line 15	\$	1,100.00	-	
8. Part 4: Tota	financial assets, line 36	\$	3,770.00	-	
9. Part 5: Tota	business-related property, line 45	\$	0.00		
		Ψ	0.00	•	
0. Part 6: Tota	farm- and fishing-related property, line 52	\$	0.00	-	
1. Part 7: Total	other property not listed, line 54	<b>+</b> \$	0.00		
2 Total paras.	and meanwarks. Add times EC thus, up C4		34,059.00		24.050.00
د. ا otal persol	nal property. Add lines 56 through 61	. \$		Copy personal property total 👈	+\$ 34,059.00
3. Total of all p	property on Schedule A/B. Add line 55 + line 62				\$ 34,059.00

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Fill in this in	nformation to ide	entify your case:	
Debtor 1	TYEASHAY	BISHOP	
	First Name	Middle Name	Last Name
Debtor 2	Wallest Co.		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	or the: Northern District of III	linois
Case number (If known)			

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1: Identi	fy the Property You Claim	as Exempt		
1.	You are clai	kemptions are you claiming? iming state and federal nonbani iming federal exemptions. 11 U	kruptcy exemptions. 11		
2.	For any proper	ty you list on <i>Schedule A/B</i> tl	hat you claim as exem	pt, fill in the information below.	
		on of the property and line on that lists this property	Current value of the portion you own Copy the value from	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule A/B:	SOFA AND BED	\$ 300.00	\$\$ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(B)
	Brief description: Line from Schedule A/B:	TV & DVD PLAYER	\$ <u>300.00</u>	\$ \$ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(B)
	Brief description: Line from Schedule A/B:	W&C CLOTHING	\$ 500.00	☐ \$ ☐ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(A)
3.	(Subject to adjust No		years after that for case	s filed on or after the date of adjustment.]  1,215 days before you filed this case?	)

Document

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Debtor 1

TYEASHAY BISHOP
First Name Middle Name

Last Name

Case number (if known)_

Part 2:

**Additional Page** 

Brief descript	ion of the property and line 4/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	·
Brief description:	MERCEDES TRUC	\$29,189.00	<b>□</b> \$	735 ILCS 5/12-1001(C)
Line from Schedule A/B:	=MPA0A@id=Henniques		100% of fair market value, up to any applicable statutory limit	Martin con a supplementary and the supplemen
Brief description:	-	\$	<b></b>	
Line from Schedule A/B:	<del></del>		☐ 100% of fair market value, up to any applicable statutory limit	
Brief		\$	<b></b> s	
description: Line from Schedule A/B:		V	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief description:		\$	U \$	
Line from Schedule A/B:	-	<del></del>	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>U</b> \$	
Line from Schedule A/B;			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from		\$	\$ \$ 100% of fair market value, up to	
Schedule A/B: Brief			any applicable statutory limit	
description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	: :
Brief description: Line from		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief description:		\$	s	ALMAN Market Control of the Control
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>D</b> \$	
Line from Schedule A/B:	Market Market Control		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>0</b> \$	
Line from Schedule A/B:	**************************************		100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your cas	ie:							
Debtor 1 TYEASHAY BISHOP First Name Middle 1	Veme	Last Name						
Debtor 2								
(Spouse, if filing) First Name Middle !		Last Name						
United States Bankruptcy Court for the: Northern	DISTRICT OF HIRRORS							
Case number (if known)							Check i	
							amende	ed filing
Official Form 106D								
Schedule D: Creditor	s Who H	ave Claims	Secur	ed b	v Prot	er	tv	12/15
Be as complete and accurate as possible.								
information. If more space is needed, copy additional pages, write your name and case	y the Additional I	Page, fill it out, numbe	r the entries,	and attac	ch it to this	form.	On the top of	any
	•	•						
1. Do any creditors have claims secured b							ž	
No. Check this box and submit this form Yes. Fill in all of the information below.	n to the court with	your other schedules.	You have nothi	ing else to	p report on t	his foi	rm.	
— 103. Fill the mornator below.								
Part 1: List All Secured Claims								
2. List all secured claims. If a creditor has n	ore than and soo	urad alaim tiet the ared	tau	Column		Colur	nn B	Column C
for each claim. If more than one creditor h	as a particular cla	im, list the other credito	rs in Part 2.	Amount Do not de	of claim	100000000000000000000000000000000000000	e of collateral supports this	Unsecured portion
As much as possible, list the claims in alph	abetical order acc	cording to the creditor's	name.	value of		clain		If any
2.1 BLACKHAWK FINANCE	Describe the pro	operty that secures the	claim:	\$ 2	9,189.00	\$	29,189.00	0.00
Creditor's Name	2012 MERCE	EDES BENZ TRUC	· K					
Number Street	37000 MILES							
		ou file, the claim is: Che	ck all that apply.					
	Contingent Unliquidated							
City State ZIP Code	Disputed							
Who owes the debt? Check one.	Nature of lien. C	heck all that apply.						
Debtor 1 only		you made (such as mortg	age or secured	_				
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)	(such as tax lien, mechanic	'a lion\					
At least one of the debtors and another	energy.	from a lawsuit	S licit;					
		ng a right to offset)		_				
Check if this claim relates to a community debt								
Date debt was incurred	Last 4 digits of a	account number						
2.2	Describe the pro	perty that secures the	claim:	\$		\$	\$	
Creditor's Name			**************************************					
Number Street	- the state of the							
	-	ou file, the claim is: Che	ck all that apply.					
	Contingent Unliquidated							
City State ZIP Code	Disputed							
Who owes the debt? Check one.	Nature of lien. Cl	neck all that apply.						
Debtor 1 only		you made (such as mortga	ge or secured					
Debtor 2 only	car loan)							
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Judgment lien	such as tax lien, mechanic from a lawsuit	s lien)					
_		g a right to offset)						
Check if this claim relates to a community debt								
Date debt was incurred	Last 4 digits of a	ccount number	Control of the Contro	Winterland-controversated-control	CE POLITIFICA NOCUMENTAL PROPERTY (CENTRAL PROPERTY CONTRACTOR OF THE POLITIFICATION OF	0-0-000 MB (00 00 00 00 00 00 00 00 00 00 00 00 00	tent Modern reconstruction and Association of continue and a supplication and a supplicat	MIGORPHIA A Professor Administration and a second a second and a second a second and a second a second and a second and a second and a
Add the dollar value of your entries in C	olumn A on this	page. Write that numb	er here:	\$ 29	9.189.00			

	Case 16-11605 Do	oc 1 Filed 04/05/16 Entered 04/05 Document Page 24 of 53	5/16 09:13:21	Desc Main	
Debtor 1	TYEASHAY BISHOP	Last Name Case nur	mber (if known)		
art 1:	Additional Page	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
Credito	r's Name	Describe the property that secures the claim:	<b>\$</b>	S	.\$
Numbe	r Street				
City	State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed			
	ves the debt? Check one. tor 1 only	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured)			
Deb Deb At le	tor 2 only tor 1 and Debtor 2 only east one of the debtors and another eck if this claim relates to a	Arrayleshell you hade (such as mongage of section car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)	-		
	nmunity debt	Last 4 digits of account number			
500/51/2000/55/00	ACC AMERICAN COMPANIENTE CONTINUES DE SEAS DE L'ACCESATION CONTINUES ACCESATION ACCESAT	Describe the property that secures the claim:	\$	\$	\$
Credito	's Name				
Deb Deb Deb At le	State ZIP Code  res the debt? Check one.  tor 1 only  tor 2 only  tor 1 and Debtor 2 only  ast one of the debtors and another  ck if this claim relates to a	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
	munity debt bt was incurred	Last 4 digits of account number			
**************************************		Describe the property that secures the claim:	nnservorsverskandskandenskersverskerskerskerskandskerskerskerskerskerskerskerskerskersker	enth-tholeure recommender de voerden de voerde de v	ningiae carone con
Creditor	's Name Street	. Describe the property that secures the claim.	<b>Q</b>	\$	Φ
City	State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed	1		
	res the debt? Check one. or 1 only	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured)			
	OL LOUBY	Lui en agreement vou mage (such as mortgage of secured			

An agreement you made (such as mortgage or secured

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Debtor 1	TYEASHA			Case number (if known)	
	First Name	Middle Name	Last Name	,	***************************************

#### List Others to Be Notified for a Debt That You Aiready Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number _____ Number Street City ZIP Code On which line in Part 1 did you enter the creditor? ____ Name Last 4 digits of account number ____ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? ____ Name Last 4 digits of account number ____ _ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number _____ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? ___ Name Last 4 digits of account number ____ _ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? ____ Name Last 4 digits of account number Number Street City State ZIP Code

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Debtor 1	is information to identify your case:		,,
	TYEASHAY BISHOP		
Deplo	First Name Middle Name	Lasi None	
Debtor 2	Bling) Fint Name Miscia Nama		
	Tellingua and Company	Leaf Hame	
United Sta	ites Bankruptcy Court for the: Northern Distr	trict of Illinois	
Case num	ber		if this is ar
(if known)		amend	led filing
	Form 106E/F		
<u> əcne</u>	quie E/F: Creditors	Who Have Unsecured Claims	12/15
A/B: Proper creditors vineeded, co	ner party to any executory contracts o Prty (Official Form 186A/B) and on Sch vith partially secured claims that are ii		edule clude any
I. Do any	creditors have priority unsecured clai	tims against you?	
2 Yes			
nonprio	and used, clertily what type of cash it is.  If y amounts. As much as possible, list the red claims, fill out the Continuation Page.	a creditor has more than one priority unsecured claim, list the creditor separately for each ci i. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and claims in alphabetical order according to the creditor's name. If you have more than two of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3	ority and
(For an	explanation of each type of claim, see the	ne instructions for this form in the instruction booklet.)	t die soon ook ook ook ook.
		Total claim Priority	Nonpriority amount
, , _		A CANADA A CANADA CANAD	WHICHR
	/ OF CHICAGO Creditor's Name	Last 4 digits of account number 6 8 8 3 \$ 244.00 \$ 244.00 \$	
-	N LASALLE ST	When was the debt incurred? 04/09/2009	
Number	Street	- A STANLEY OF THE ST	
		As of the date you file, the claim is: Check all that apply.	
	CAGO IL 60601	Contingent	
City	State ZIP Code	Unitiquidated	
	scurred the debt? Check one.	Disputed	
	manus aut.		
Ø Det			
Ø Det □ Det	ntor 2 only	Type of PRIORITY unsecured claim:	
Ø Det □ Det □ Det	otor 2 only otor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
Det Det Det	ntor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations	
Det Det At it	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and cartain other debts you owe the government	
Det Det Det Det At it	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eck if this claim is for a community debt	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were	
Det Det Det At it	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated	
Det Det Det Det Chi Stree No	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another each if this claim is for a community debt claim subject to offset?	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were	
Det Det Det Che Is the C Yes	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS	
Det	otor 2 only otor 1 and Debtor 2 only sast one of the debtors and another sack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 \$ 122.00 \$ 122.00 \$	-Control on the state of the st
Det	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name  N LASALLE	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS	
Det	otor 2 only otor 1 and Debtor 2 only sast one of the debtors and another sack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 \$ 122.00 \$ 122.00 \$ When was the debt incurred? 04/11/2009	
Det	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name N LASALLE Street	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply.	
Det	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name N_LASALLE Street  SAGO IL 60601	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply.	
Det	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name N LASALLE Street  State ZiP Code	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated  Other. Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s  When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	-Conductor to the state of the
Det	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name N LASALLE Street  AGO IL 60601 State ZIP Code curred the debt? Check one.	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply.	-Conductor to the state of the
Det	otor 2 only otor 1 and Debtor 2 only east one of the debtors and another eack if this claim is for a community debt claim subject to offset?  OF CHICAGO reditor's Name N LASALLE Street  AGO IL 60601 State ZIP Code curred the debt? Check one.	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated  Other. Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s  When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed	-Control to the special part of the special pa
Det	ptor 2 only ptor 1 and Debtor 2 only past one of the debtors and another pack if this claim is for a community debt claim subject to offset?  COF CHICAGO reditor's Name N LASALLE Street  CAGO IL 60601 State ZIP Code curred the debt? Check one. tor 1 only tor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:	
Deb	otor 2 only otor 1 and Debtor 2 only seast one of the debtors and another seck if this claim is for a community debt claim subject to offset?  COF CHICAGO reditor's Name N LASALLE Street  CAGO IL 60601 State ZIP Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations	
Detrict Of Debti	ptor 2 only ptor 1 and Debtor 2 only past one of the debtors and another pack if this claim is for a community debt claim subject to offset?  OF CHICAGO recitor's Name N LASALLE Street  CAGO IL 60601 State ZIP Code curred the debt? Check one. tor 1 only tor 2 only past one of the debtors and another	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were introdicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	-Contribute to the state of the
Detrict Debti	otor 2 only otor 1 and Debtor 2 only seast one of the debtors and another seck if this claim is for a community debt claim subject to offset?  COF CHICAGO reditor's Name N LASALLE Street  CAGO IL 60601 State ZIP Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify PARKING TICKETS  Last 4 digits of account number 0 4 0 3 s 122.00 s 122.00 s When was the debt incurred? 04/11/2009  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations	

Case 16-11605 Doc 1 Filed 04/05/16 Entered 04/05/16 09:13:21 Page 27 of 53 Document TYEASHAY BISHOP Case number at Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Nonpriority CITY OF CHICAGO Last 4 digits of account number 8 9 9 5 s 146.40 s 146.40 s Priority Creditor's Name 121 N LASALLE 04/11/2009 When was the debt incurred? As of the date you file, the claim is: Check all that apply. **CHICAGO** 60602 Contingent ☐ Unliquidated ZIP Code ☐ Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ☐ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other, Specify PARKING TICKETS is the claim subject to offset? M No ☐ Yes CITY OF CHICAGO s 7.600.80 s 7,600.86 s Last 4 digits of account number Priority Craditor's Name 121 N LASALLE When was the debt incurred? 04/10/2009 As of the date you file, the claim is: Check all that apply. **CHICAGO** IL 60602 Contingent ZIP Code Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other, Specify PARKING TICKETS is the claim subject to offset? V No CITY OF CHICAGO Last 4 digits of account number 8 8 6 2 \$ 244.00 s 244.00 s Priority Creditor's Name 121 N. LASALLE When was the debt incurred? 10/23/2014 As of the date you file, the claim is: Check all that apply. Contingent 60602

Yes

Debtor 1

**CHICAGO** ZIP Code

Who incurred the debt? Check one.

62 Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

is the claim subject to offset?

M No

Yes

Type of PRIORITY unsecured claim:

☐ Taxes and certain other debts you owe the government

Claims for death or personal injury white you were

Other, Specify PARKING TICKETS

Domestic support obligations

☐ Unliquidated ☐ Disputed

intoxicated

Filed 04/05/16 Entered 04/05/16 09:13:21 Page 28 of 53 Document TYEASHAY BISHOP Debtor 1 List All of Your NONPRIORITY Unsecured Claims Part 2: Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 2 Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim PEOPLES ENERGY Last 4 digits of account number Nonpriority Creditor's Name 254.20 200 E. RANDOLPH When was the debt incurred? **CHICAGO** 60601 As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Ø No Other. Specify UTILITY BILL ☐ Yes SPRINT Last 4 digits of account number 300.00 Nonpriority Creditor's Name When was the debt incurred? PO BOX 4191 **CAROL STREAM** 60197 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. Untiquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **2** No Other Specify CELL PHONE BILL Yes COMED Last 4 digits of account number Nonpriority Creditor's Name 410.00 When was the debt incurred? PO BOX 6111 Number Street **CAROL STREAM** 60197 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce is the claim subject to offset? that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Mo No Other, Specify <u>UTILITY BILL</u> Yes

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Peblor 1 I YEASHAY BISHOP	only number (if known)	
First Name Leat Name		>4
Part 2: Your NONPRIORITY Unsecured Claims — Conti	nuation Page	· ·
for listing any antice on this near much ask and		
After listing any entries on this page, number them beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
BLACKHAWK FINANCE	Last 4 digits of account number	20 400 D
Nonpriority Creditor's Name	When was the debt incurred? 05/12/2015	<u>\$ 29,189.0</u>
Number Street		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
	☐ Disputed	
Debtor 1 only Debtor 2 only		
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check If this claim is for a community debt	you did not report as priority claims	
is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No.	Other. Specify CAR LOAN	
Yes		
	Last 4 digits of account number	_
Nonpriority Creditor's Name	mane a silities or property lifetimes.	5
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
***	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	The state of the s	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	C Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or dispose that	
Check if this claim is for a community debt	you did not report as priority claims	
is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
D No	Other. Specify	
Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street		
City State 719 Code	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	· ·	
At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other. Specify	1
□ No	And the second s	
☐ Yes		

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Debtor 1

1	YEA	SHA	VE	HOL	
1	مرتبا ا	(OTIV	<b>11</b> E	MOL.	vr

t Name Middle Name Last Na

Case number (# known)

р	art	3
	-	

List Others to Be Notified About a Debt That You Aiready Listed

		persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City	State ZP Co	anderes  Control of the Control of t
Name	,	On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured Claims
ity	State ZIP Cod	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 dld you list the original creditor?
		Line of (Check one): Q Part 1: Creditors with Priority Unsecured Claims
Vumber	Street	Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZP Cod	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Q Part 1: Creditors with Priority Unsecured Claims
Vumber	Street	Part 2: Creditors with Nonpriority Unsecured Claims
<del></del> -		
ity	State ZIP Cod	Last 4 digits of account number
iamo		On which entry in Part 1 or Part 2 did you list the original creditor?
van in		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
<b>Vumber</b>	Street	Part 2: Creditors with Nonpriority Unsecured
		Claims
ity	State ZP Code	Last 4 digits of account number
ieme		On which entry in Part 1 or Part 2 did you list the original creditor?
1001		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
(umber	Street	Part 2: Creditors with Nonpriority Unsecured
<del></del>		Claims
ay	State ZIP Code	Last 4 digits of account number
lame		On which entry in Part 1 or Part 2 did you list the original creditor?
- · · ·		Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
lumber	Street	Part 2: Creditors with Nonpriority Unsecured
**************************************		Claims
łty	State ZIP Code	

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Debtor 1

TYEASHAY BISHOP

Iret Name Middle Name

Last Name

the state of

Case number (# unawn)_____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
 Add the amounts for each type of unsecured claim.

					Total claim	
Totel claims from Part 1	68	. Domestic support obligations	6a.		\$	
	6t	Taxes and certain other debts you owe the government	6b.		\$	
	60	Claims for death or personal injury while you were intoxicated	6c.		\$	
	6d	i. Other. Add all other priority unsecured claims.  Write that amount here.	6d.	+	· \$	8,357.20
	ве	. Total. Add lines 6a through 6d.	6e.		\$	8,357.20
					Total claim	
otal claims	6f.	Student loans	6f.		•	
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	0			**************************************
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6g.			
		outdigit Catility	6h.		\$	
	61.	Other. Add all other nonpriority unsecured claims. Write that amount here.	<b>6</b> i.	+	\$	30,153.20
	6j. '	Fotal. Add lines 6f through 6i.	<b>6</b> j.		\$	38,510.40

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Fill in this	nformation to ide	ntify your case:			
	TYEASHAY E	and the second			
Debtor	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If filing	) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for	the: Northern District of Ill	inois		
Case number					☐ Check if this is an
					amended filing
Secial at all	Farm 4000				
	Form 106G	****			
sched	ule G: Ex	ecutory Con	tracts and	<b>Unexpired Leases</b>	12/15
1. Do you  No. ( Yes.	have any executor Check this box and Fill in all of the info	rmation below even if the	d leases?  t with your other sched contracts or leases are	ules. You have nothing else to report on this form. listed on Schedule A/B: Property (Official Form 10 act or lease. Then state what each contract or lease in the instruction booklet for more examples of ex	06A/B).
unexpire	d leases.	ou, our priories, occ the h	nondenono for trito form	The instruction bookiet for more examples of ex	ecutory contracts and
Person (	or company with y	vhom you have the cont	enat or lands	64-4	
· 015011	or company with v	ations you have the cont	ract or lease	State what the contract or lease is for	
.1					
Name					
Number	Street				
*****					
City	\$\$\.\tau\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\rangle\	State ZIP Code	minty the property of the control of		Primer No. A service of Process of State S
2					
Name					
Number	Street				
City		State ZIP Code			
	this traver of the Perchalism and Bardy Philosophic Service of Ser	State ZIP Code	er til forskrifte for meg sidd het trede for til det sett betyret er til til de sidd het sidd het sidd het sidd	\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	namenad perimangahan terberahan dan perpenyanyan yang periman perimanan perimanan perimanan berahan berahan ber
Name					
Number	Street				
City		State ZIP Code			
4	a annual a st. Landon a 155 annual 25 annual 25 annual 25 de se annual 15 annual 25 de se annu	and a properties and experience as a some artists as Contracted Mark 2015 and extra and the two	mander of the state of the stat		
Name				·	
Number	Street				
City	de Children and a responsible to the control of the	State ZIP Code			
5	The second secon		- The state of the	and the state of t	and the second second second of the second s
Name	Madistructure.	##- <del></del>			
Number	Street				
,	Outes				
City		State ZIP Code			

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Deb	tor 1	TYEASHAY	BISHOP		Cana aumhan
			Middle Name	Last Name	Case number (if known)
		Additional Pa	age if You H	ave More Contracts or Lease	es ·
	Persor			ı have the contract or lease	What the contract or lease is for
2.2					
	Name		***************************************		_
And the second second	Number	Street			<del></del>
	City		State	ZIP Code	
2	er a North Na Rheida eile air	er egyponologiský medisku ži tv. spakkyte s výs nekt veli medisku prok v ki s veli veli medisku prok v ki medi	restantes (titulogistant metropologistant (betro tita) tita	والمنافرة والمنا	
	Name	***************************************			_
	Number	Street		3/2-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	_
	City		State	ZIP Code	MANAGEM CONTRACTOR OF THE CONT
2	ECONOCIONA A SPANISA MASA		halifula ta esse y transconysississe, essect es se	医克克氏试验 医克克氏试验 化二氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	
	Name				•••••
	Number	Street			_
	City		State	ZIP Code	_
2	2000 S 2060 A S CONDO V 2000	alerydogoning moral og en elektrol (2015) (2015) (2015)			
2	Name				_
	Number	Street			_
		Olicei	····		
	City	EPYTONIOTO COMPLETO CONTRACTOR COMPLETO CONTRACTOR CONT	State	ZIP Code  ***********************************	
2	Name				<u> </u>
					<u>·</u>
	Number	Street			
	City	2/4 4 13/4/20 40 1/20 1/4/4/20/4/20/4/20/4/20/4/20/4/20/4/20/4	State	ZIP Code	PAPET WHITE HE WAS AS IT SECOND SECON
2					
	Name				
	Number	Street			
ere - ner og ggr	City		State	ZIP Code	_
2				and the section of th	
	Name				_
	Number	Street			ance
	City		State	ZIP Code	_
2	PORTECTION OF SECURITY CONS		n var vin til vilken fra til kallen fra til kallen fra skrivet fra til kallen fra skrivet fra til kallen fra s	and the second	
	Name				_
	Number	Street			<del></del>
- contribution	City	Additional and a second	State	ZIP Code	_

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Fill in this information to identify your case:	
Debtor 1 TYEASHAY BISHOP	
First Name Middle Name Last Name	-
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If known)	☐ Check if this is a
	amended filing
Official Form 106H	· ·
Schedule H: Your Codebtors	12/15
Codebtors are people or entities who are also liable for any debts you may have.	Be as complete and accurate as nossible. If two married neon
are filing together, both are equally responsible for supplying correct information and number the entries in the boxes on the left. Attach the Additional Page to this case number (if known). Answer every question.	. If more space is needed, copy the Additional Page, fill it out
1. Do you have any codebtors? (If you are filing a joint case, do not list either spous	se as a codebtor.)
☑ No	
☐ Yes	
2. Within the last 8 years, have you lived in a community property state or territ	ory? (Community property states and territories include
Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, V  Mo. Go to line 3.	Vashington, and Wisconsin.)
Yes. Did your spouse, former spouse, or legal equivalent live with you at the tire	2
No	ne?
Yes. In which community state or territory did you live?	Cill in the name and assessed address of the house
Too. In which community state or territory and you live?	rill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
Number Street	<del></del>
City State ZIP Code	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codel shown in line 2 again as a codebtor only if that person is a guarantor or cosis Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor	gner. Make sure you have listed the creditor on
<u> </u>	Check all schedules that apply:
3.1	_
Name	Schedule D, line
Number Street	Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	engari program (Ar et 1). E. N. s collision es consiste del della collision de
3.2	
Name	Schedule D, line
Number Street	Schedule E/F, line
	Schedule G, line
City Slate ZIP Code	
3.3	Cahadula D. Kas
Name	Schedule D, line
Number Street	Schedule E/F, line
	☐ Schedule G, line

ZIP Code

State

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Debtor 1

	First Name Middle Name	Last Name	···	Case number (if known)
	Additional Page to List	More Codebtors		
:	1: Your codebtor		· · · · · · · · · · · · · · · · · · ·	Column 2: The creditor to whom you owe the deb
_]				Check all schedules that apply:
Name				Schedule D, line
reging				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
Name			***************************************	Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City	an and distributions and an analysis of the second second second second second second second second second sec	State	ZIP Code	
Name				Schedule D, line
, and				Schedule E/F, line
Number	Street			Schedule G, line
***************************************				
City	turing nambu ang	State	ZIP Code	ON ANTER THE PROPERTY OF THE P
	49404			Schedule D, line
Name				☐ Schedule E/F, line
Number	Street		······································	Schedule G, line
City		State	ZIP Code	
Name				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			Schedule G, line
City	martialistic of State Control of State and West of State Sta	State	ZIP Code	
Name				Schedule D, line
744110				☐ Schedule E/F, line
Number	Street			Schedule G, line
City	especialis (1 (1) at 1 (1) at	State	ZiP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
Carr				Notes Inches
City	na naka kenana aka an inda naka na masan kangula kenala da	State	ZIP Code	
Name				Schedule D, line
-				☐ Schedule E/F, line
Number	Street	440000000000000000000000000000000000000	4-10-10-10-10-10-10-10-10-10-10-10-10-10-	Schedule G, line

City

ZIP Code

State

Fill in this information	to identify your case:				•••
Debtor 1 YEAS	HAY BISHOP	Lest Name			
Debtor 2 (Spouse, if filing) First Name	Edicidie Name		<u> </u>		
	Court for the: Northern District of Illino	Lest Neme	· ·		
Case number	COURT OF THE PROPERTY CHISTINGS OF PHINO	ıs			
(If known)			-	Check if this is:	,
				An amended filing	e estado de la lam
			<u>.</u>	A supplement showing por income as of the following	tpetition chapter 13 date:
Official Form 106				MM / OD / YYYY	
Schedule I	: Your Income				12/15
if you are separated and separate sheet to this for	curate as possible. If two married p nation. If you are married and not I your spouse is not filing with you arm. On the top of any additional p Employment	niing joinny, and	your spouse is livi	ng with you, include informati	on about your apouse.
Fill in your employment information.	ent	Debtor 1		Debtor 2 or non-l	ui
If you have more than	one job,		**************************************	Ventor 2 of Holps	sing spouse
attach a separate pag- information about addi		2 Employed	4	☐ Employed	
employers.			☐ Not employed		
Include part-time, seas self-employed work.	sonal, or			•	
Occupation may includ	Occupation may include student or homemaker, if it applies.		STYLIST/BARBER		······································
	Employer's name	CUSTOM C	UTS		
	Employer's address	4004.0340			,
	minholds a decista	4964 S WO Number Stree		Number Street	
		· · · · · · · · · · · · · · · · · · ·			
					-
		CHICAGO	IL 60	653	
		City	State ZIP Code	City	State ZIP Code
	How long employed the	re? 1YEAR	_	1YEAR	
Part 2: Give Detail	is About Monthly Income		_		
Estimate monthly inco	ome as of the date you file this for	m If you have not	sing to cannot for any	Non costa ON to the	
If you or your non-filing	SDOUSE have more than one employe	er combine the inf			
Delow. If you need more	space, attach a separate sheat to the	nis form.	For Debt		
2. List manthly successive			***************************************	non-filing spouse	
deductions). If not paid	ages, salary, and commissions (be monthly, calculate what the monthly	efore all payroll wage would be.	^{2.} \$_2,639	.00 s	:
3. Estimate and list mon	thly overtime pay.		3. +\$	<b>*</b> \$	
4. Calculate gross incon	ne. Add line 2 + line 3.		4. \$_2,639	.00 \$	

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Det	otor 1	First Name Middle Name Lest Name		Case number (# know	m)	
				For Debtor 1	For Debtor 2 or non-filing spouse	
	Сор	y line 4 here	<b>→</b> 4.	<b>\$</b> 2,639.00	\$	
5.	List	all payroli deductions:				
	5a.	Tax, Medicare, and Social Security deductions	5a.	<b>\$</b> 189.00	\$	
	5b.	Mandatory contributions for retirement plans	, 5b.	\$	\$	
	5c.	Voluntary contributions for retirement plans	5¢.	\$	\$	
	5d.	Required repayments of retirement fund loans	5d.	\$	\$	
	5 <del>e</del> .	Insurance	5e.	<b>\$</b> 100.00	\$	
	5f.	Domestic support obligations	5f.	\$	\$	
	5g.	Union dues	5g.	\$	\$	
	5h.	Other deductions. Specify: UNIFORM FEES	5h.	+\$ 50.00	+ \$	
6.		d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	s 339.00	\$	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	<b>\$</b> 2,300.00	\$	
8.	List	all other income regularly received:				
	8a.	Net income from rental property and from operating a business, profession, or farm				
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
	8b.	Interest and dividends	8b.	\$	<b>\$</b>	
	8c.	Family support payments that you, a non-filling spouse, or a depende regularly receive	ent			
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
	8d.	Unemployment compensation	8d.	\$	\$	
	<b>8e</b> .	Social Security	8e.	\$	\$	
		Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ice 8f.	S	s	
			**			
	_	Pension or retirement income	8g.	\$	5	
		Other monthly income. Specify:	8h.	+\$	+\$	
		i all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	<del>,</del>
		ulate monthly Income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 2,300.00 +	\$	2,300.00
	inclu	e all other regular contributions to the expenses that you list in Sched de contributions from an unmarried partner, members of your household, y ds or relatives.			mates, and other	
	Do n Spec	ot include any amounts already included in lines 2-10 or amounts that are life:	not av	allable to pay expense	es listed in <i>Schedule J.</i> 11. <b>+</b>	· <b>s</b>
	٠	the amount in the last column of line 10 to the amount in line 11. The	roges#	is the combined most	-	
		e that amount on the Summary of Your Assets and Liabilities and Certain S			-	\$ 2,300.00 Combined
13,	Doy Zi	you expect an increase or decrease within the year after you file this f	orm?			monthly income
		Yes. Explain:	***********			
		£				

C.H. (a. P.)	And the second of the second o			·•'
Fill in this information to iden				
Debtor 1 TYEASHAY BI	SHOP	Check if ti	hie le·	
Debtor 2 (Spouse, if filing) First Name			ended filing	
United States Bankruptcy Court for t	Sant Carle			stpetition chapter 13
Case number	ne: Notatenti districi di Illinois	expens	ses as of the following	ng date:
(if known)		MM / D	D/ YYYY	
Official Form 106J				
Schedule J: Y	our Expenses			12/15
Be as complete and accurate as information. If more space is ne (if known). Answer every question.	possible. If two married people are fi eded, attach another sheet to this form on.	ling togather, both are equally r n. On the top of any additional	esponsible for suppl pages, write your nai	
	ousehold			
1. Is this a joint case?				•
No. Go to line 2. Yes. Does Debtor 2 live in:	B Sangrata kawashald?			
□ No	e salandra morastrois i			
	file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No	мен и ме Не при	in de principal magnifique de Labor de Laborator que principal tique de Labor de Laborator anno de la Carlo de	tier – wholed who makes their extellerings water (\$1000000) and constituent manuals was constituent upon part
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	,	SON	6	No Yes
		SON	. 2	No SZI Yes
				□ No
			<del></del>	☐ Yes
			***************************************	□ No
				☐ Yes ☐ No
The second secon	The second secon		***	Yes
Do your expenses include expenses of people other than yourself and your dependents?	Ø No □ Yes		TARABATA TA	THE MEAN OF THE PROPERTY OF TH
por a position por a		Company of the William Company of the Company of the Company	mineral of the second of the second	*************************
	oing Monthly Expenses			
expenses as of a date after the baspelicable date.	r bankruptcy filing date unless you ar nkruptcy is filed. If this is a suppleme	e using this form as a supplem ntal Schedule J, check the box	ent in a Chapter 13 c at the top of the form	ase to report and fill in the
nclude expenses paid for with no	n-cash government assistance if you	know the value of		
such assistance and have include	d it on <i>Schedule I: Your Income</i> (Offic	ial Form 106i.)	Your exper	1808
<ol> <li>The rental or home ownership any rent for the ground or lot.</li> </ol>	expenses for your residence, include f	irst mortgage payments and	\$	300.00
If not included in line 4:				
4s. Real estate taxes			4a. \$	
4b. Property, homeowner's, or a			4b. \$	
4c. Home maintenance, repair,				
4d. Homeowner's association of	r condominium dues		4d. \$	

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Debtor 1	TYEASHAY BISHOP First Name Middle Name Last Name	Case number (if snown)
----------	--------------------------------------------------	------------------------

			Your expenses
5.	. Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:	٠	
	6e. Electricity, heat, natural gas	6a.	s 100.00
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$150.00
	6d. Other. Specify:	6d.	\$
7.		7.	s 200.00
8.	Childcare and children's education costs	8.	\$ 250.00
9.	· ·	9.	\$ 50.00
10.	Personal care products and services	10.	s 45.00
11,	Medical and dental expenses	11.	
12.		• • • • • • • • • • • • • • • • • • • •	
	Do not include car payments.	12.	\$ 150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	s 100.00
	15c. Vahicle insurance	15c.	\$ 120.00
	15d. Other insurance, Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$
17.	installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	s 760.00
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	170.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from	174,	
	your pay on line 5, Schedule I, Your Income (Official Form 106).	18.	•
19.	Other payments you make to support others who do not live with you.		¥ <del></del>
	Specify:	40	•
		19.	\$
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		•
	20s. Mortgages on other property	20a.	\$
	20s. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20s.	\$

Document Page 40 of 53 TYEASHAY BISHOP Debtor 1 Case number and 21. Other. Specify: 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 2,225.00 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 2.225.00 23. Calculate your monthly net income. 2,300.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22c above. 2,225.00 23b 23c. Subtract your monthly expenses from your monthly income. 75.00 The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. Tyes.

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Fill in this in	nformation to ide	ntify your case:		
Debtor 1	TYEASHAY	BISHOP		
	First Name	Middle Name	Last Name	************
Debtor 2				
(Spouse, if filing	) First Name	Middle Name	Last Name	
United States  Case number (If known)	Bankruptcy Court fo	r the: Northern District of I	llinois	
(II II IO77,7)		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the that they are true and correct.	summary and schedules filed with this declaration and
* Jeashen Bisp *	
Signature of Debtor 1	Signature of Debtor 2
Date 04/04/2016 MM / DD / YYYY	Date

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TVEACUAY DIOLOG			
Debior 1 TYEASHAY BISHOP			
Paul Name Middle Name Debtor 2	Lest Name	- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Spouse, if filing) Fine Name Middle Name	Last Name		
nited States Bankruptcy Court for the: Northern District of	of Illinois	`.	
ase number			
known)	<del></del>		☐ Check if this is a
		<del></del>	amended filing
fficial Form 107			
atement of Financial Affa	irs for Indi	viduals Filing for B	ankruptcy 12/
ermation. If more space is needed, attach a separate (if known). Answer every question.  Give Details About Your Marital Str			and the four tenne and base
What is your current marital status?			
Married			* · ·
☐ Not married			
Yes. List all of the places you lived in the last 3 y  Debtor 1:	Dates Debtor 1	Debtor 2:	
·	lived there		Dates Debtor 2 lived there
	lived there	Same as Debtor 1	
Number Street	lived there	Same as Debtor 1	lived there
Number Street			lived there
Number Street	From	Same as Debtor 1	Same as Debior 1
Number Street  City State ZIP Code	From	Same as Debtor 1  Number Street	Same as Debior 1
	From	Same as Debtor 1  Number Street	Same as Debtor 1  From To ZIP Code
City State ZIP Code	From	Number Street  City State  Same as Debtor 1	From To Same as Debtor 1
	From To	Same as Debtor 1  Number Street  City State	Same as Debtor 1  From To  ZIP Code   Same as Debtor 1  From
City State ZIP Code	From	Number Street  City State  Same as Debtor 1	Same as Debtor 1  From To  ZIP Code
City State ZIP Code  Number Street	From	Same as Debtor 1  Number Street  City State  Same as Debtor 1  Number Street	Same as Debtor 1  From To  ZIP Code  Same as Debtor 1  From
City State ZIP Code  Number Street  City State ZIP Code  Vithin the last 8 years, did you ever live with a spetates and territories include Arizona, California, Idah	FromToToToTo	Number Street  City State  Number Street  City State  City State	Same as Debtor 1  From To  ZIP Code  ZIP Code  ZIP Code
City State ZIP Code  Number Street  City State ZIP Code  Vithin the last 8 years, did you ever live with a speciales and territories include Arizona, California, Idah	From To To Ouse or legal equivo. Louisiana, Nevado	Same as Debtor 1  Number Street  City State  Number Street  City State  City State  City State  Alent in a community property state  A, New Mexico, Puerto Rico, Texas,	Same as Debtor 1  From To  ZIP Code  ZIP Code  ZIP Code
City State ZIP Code  Number Street  City State ZIP Code  Within the last 8 years, did you ever live with a spectates and territories include Arizona, California, Idah	From To To Ouse or legal equivo. Louisiana, Nevado	Same as Debtor 1  Number Street  City State  Number Street  City State  City State  City State  Alent in a community property state  A, New Mexico, Puerto Rico, Texas,	Same as Debtor 1  From To  ZIP Code  ZIP Code  ZIP Code

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ebto		# Name	Case n	umber (# known)	
ł	Did you have any income from employme fill in the total amount of income you receive If you are filing a joint case and you have inc	ed from all jobs and all bus	inesses, includino part-t	ime activities	endar years?
	Yes. Fill in the details.				
		Detect		and the second	
		Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipe  Operating a business	\$6,900.00	Wages, commissions, bonuses, tips Operating a business	\$
	For last calendar year:	Wages, commissions,	07.000.00	Wages, commissions.	
	(January 1 to December 31, 2015	bonuses, tips  Operating a business	\$ 27,600.00	bonuses, tips  Operating a business	\$
	For the calendar year before that:	Weges, commissions, bonuses, tips	٠	Wages, commissions, bonuses, tipe	
	(January 1 to December 31,	Operating a business	<b>&gt;</b>	Operating a business	\$
Lis	mbling and lottery winnings. If you are filing at each source and the gross income from a No.  Yes. Fill in the details.				•
		Osciera .		Outura (Constitution)	
		Sources of Income Describe below.	Gross income from sach source (before deductions and exclusions)	Sources of income Describe below.	Grees income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	***************************************			
					\$s
	For last calendar year:	<u> </u>			~ <del></del>
				***************************************	\$
	(January 1 to December 31,2015 )	<b></b> \$			\$\$ \$\$
	For the calendar year before that:	\$. •			\$
	· · · · · · · · · · · · · · · · · · ·	\$			\$

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	I YEASHAY BISHOP First Name Middle Name Leaf Name		Cası	e number (#www)	
rt 3:	List Certain Payments You Made Be	fore You File	d for Bankruptcy		
Arc ait	har Dahhar dia an Baldan Bi				
	her Debtor 1's or Debtor 2's debts primarily				
P No.	"Incurred by an individual primarily for a pers	ANTIBLE, FURTING, OF	nousenous purpose."		01(8) as
	During the 90 days before you filed for bank	uptcy, did you (	pay any creditor a total o	of \$6,225* or more?	
	No. Go to line 7.		:		
•	Yes. List below each creditor to whom yo total amount you paid that creditor. child support and alimony. Also, do				) 
	child support and alimony. Also, do * Subject to adjustment on 4/01/16 and even	3 vears after the	ments to an attorney for lat for cases filed on or :	this bankruptcy case.	•
⊒ Yes	Debtor 1 or Debtor 2 or both have primaril		the tot among mon off of	arres are date of solosunsul	<b>.</b>
	During the 90 days before you filed for bankn	y consumer ea	IDES. Su sou creditor o total of	£ #000	
	No. Go to line 7.	-p.u), u.u juu p	at any creditor a total of	1 \$000 OF MIQ18 (	
	Yes. List below each creditor to whom you creditor. Do not include payments fo allmony. Also, do not include payments				
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name	*****	\$	\$	
					Car
	Number Street				
	Number Street				Credit card
	Number Street				Credit card Loan repayment
	Number Street  City State ZIP Code				Credit card Cup Loan repayment Cup Suppliers or vendon
					Credit card
	City State ZIP Code		\$		Credit card Clean repayment Suppliers or vendor
			\$	. \$	Credit card Can repayment Suppliers or vendor Other Mortgage
	City State ZIP Code		\$	· •	Credit card Cloan repayment Suppliers or vendon Other Montgage Car
	City State ZIP Code Creditor's Name		\$	· •	Credit card Loan repayment Suppliers or vendor Other Mongage Car Credit card
	City State ZIP Code Creditor's Name		\$	· - \$	Credit card  Loan repayment  Suppliers or vendor  Other  Mortgage  Car  Credit card  Loan repayment
	City State ZIP Code Creditor's Name		\$	· • • • • • • • • • • • • • • • • • • •	Credit card  Loan repayment  Suppliers or vendor  Other  Mortgage  Car  Credit card  Loan repayment  Suppliers or vendors
	City State ZIP Code  Creditor's Name  Number Street		\$	· • • • • • • • • • • • • • • • • • • •	Credit card  Loan repayment  Suppliers or vendor  Other  Mortgage  Car  Credit card  Loan repayment
	City State ZIP Code  Creditor's Name  Number Street		\$		Credit card  Loan repayment  Suppliers or vendor  Other  Mortgage  Car  Credit card  Loan repayment  Suppliers or vendors
	City State ZIP Code  Creditor's Name  Number Street		\$\$\$	\$	Credit card  Loan repayment  Suppliers or vendors  Other  Mortgage  Car  Credit card  Loan repayment  Suppliers or vendors
	City State ZIP Code  Creditor's Name  Number Street  City State ZIP Code		\$	. \$	Credit card  Loan repayment  Suppliers or vendors  Other  Mortgage  Car  Credit card  Loan repayment  Suppliers or vendors  Other  Other
	City State ZIP Code  Creditor's Name  Number Street  City State ZIP Code		\$	. \$	Credit card Loan repayment Suppliers or vendors Other Credit card Loan repayment Suppliers or vendors Other Mortgage
	Creditor's Name  Creditor's Name  Cay State ZiP Code  Creditor's Name		\$	. \$	Credit card  Loan repayment  Suppliers or vendon  Other  Mortgage  Car  Credit card  Loan repayment  Suppliers or vendors  Other  Mortgage
	Creditor's Name  Creditor's Name  Cay State ZiP Code  Creditor's Name		\$\$		Credit card  Loan repayment  Suppliers or vendon  Other  Mortgage  Car  Credit card  Loan repayment  Suppliers or vendors  Other  Mortgage  Car  Credit card  Cother  Cother

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f 1	TYEASHAY BISHOP				Case number (if know	_1	
	First Name Middle Name	Last Name		·····	Oddo significa (irina)	<i>*************************************</i>	
corpo gent	in 1 year before you filed for ors include your relatives; any trations of which you are an or i, including one for a business as child support and allmony.	general partners fficer, director, pe you operate as a	: relatives of any rson in control.	r general partners; or owner of 20% o	partnerships of whi	ich you are a general partne	
	o es. List all payments to an ins	ider.			•		
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	v M 10341b – Falen b
ī	naider's Name	***************************************		\$	_ \$		
ĩ	Wimber Street						
	Samuel Samuel						
-							
C	<b>3</b>	ate ZIP Code				<u> </u>	
k	ssider's Name			\$	. \$ <u> </u>		
N	tumber Street						
_		······					
C	ky St	ite ZIP Code	-				
	1 year before you filed for bider?  payments on debts guarante			ayments or trans	fer any property o	n account of a debt that be	anefit
No Yes		M					
i i era	s. List all payments that benef	ted an insider.	Dates of	Total amount	*		
			payment	paid	Amount you still own	Reason for this payment include creditor's name	
ins	ider's Nome		· · · · · · · · · · · · · · · · · · ·	\$	\$		
NI.							
190	mber Street		_	÷			ų.
*****							
City	Stat	a ZIP Code					
				s	\$	The state of the s	,
insi	der's Neme		***************************************	* *************************************	**************************************		
Nun	nber Street	WWW	<del></del>				
					;		
<del></del>			_				
City	State	21D Code			•		

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for 1	TYEASHAY BISHOP		Case number (# inc		
	First Name talkidde Name La	tt Name	Case (IQ())DE: (ED)C	***)	
art 4:	Identify Legal Actions, Repor	sessions, and Foreclosure	<b>15</b>		
Withir	1 year before you filed for bankrup	atcy, were you a party in any la	wsuit, court action, or adn	ninistrative pro	ceeding?
PIST ORI	such matters, including personal injuit intract disputes.	y cases, small claims actions, d	ivorces, collection suits, pate	rnity actions, su	pport or custody modifi
	man disputes.				•
No					
₩ Ye	s. Fill in the details.				
	:	Nature of the case	Court or agency		Status of the c
		,			
C	ase title	_	Court Name		Pending
					On appeal
		,	Number Street	·	Concluded
Ca	ise number				
			City Sta	te ZIP Code	·
			· W		
Ce	se title			***	Pending
		•	Court Name		On appeal
		•	Number Street	·	Concluded Concluded
Ca	se number		:settuting: Studet		Concluded
-	se number		Cky Sta	te ZIP Code	
Yes.	Fill in the information below.				
		Describe the property		Date	Value of the proper
			The state of the s		
	Creditor's Name	`		:	
	CITOROS S HANDE			· · · · · · · · · · · · · · · · · · ·	
	Number Street		,		•
		Explain what happens			
		Property was re			
		Property was for			
	City State ZIP Co	Property was ga			
	City State ZiP Coo		ached, seized, or levied.	dan maganagan mara ayan 1900 ayan da da hanan ar an 1900 a panangangan da	and the state of t
		Describe the property		Date	Value of the prope
					\$
	Creditor's Name				
	Number Street	<del> </del>		ŧ	
	seumes of set	Explain what happened	1		
		P***			
		Property was rep			
		Dennerty in a nor			
1	City State ZIP Code		nished. Iched, seized, or levied.		
		WINE FIGURETA WAS SITE	CAUSE SMITHO OF INVIAO		

Document Page 47 of 53 TYEASHAY BISHOP Debtor 1 Case number (# Ano 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? U No Yes. Fill in the details. Describe the action the creditor took Creditor's Name Number Street State ZiP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creptitors, a court-appointed receiver, a custodian, or another official? M No Q Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? DE No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Der berson Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts per person Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you _

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Doc 1

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1 TYEASHAY BISHOP			
First Name Middle Name	Last Name Case number	(if known)	
Vithin 2 years before you filed for bank No Yes. Fill in the details for each gift or o	kruptcy, did you give any gifts or contributions with a to contribution.	otal value of more than	\$600 to any charity
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Cherity's Name		· ·	\$
4000000	***		\$
Number Street			
		·	
City State ZIP Code	<del></del>		
6: List Certain Losses			
thin 1 year before you filed for bankrusaster, or gambling?  No Yes. Fill in the details.	uptcy or since you filed for bankruptcy, did you lose any	ything because of theft	t, fire, other
ithin 1 year before you filed for bankr. saster, or gambling?	Describe any insurance coverage for the loss	Date of your	
ithin 1 year before you filed for bankrusastar, or gambling?  No Yes. Fill in the details.	Describe any insurance coverage for the loss	Date of your	Value of property lost
ithin 1 year before you filed for bankrusaster, or gambling?  No  Yes. Fill in the details.	Describe any insurance coverage for the ices Include the amount that insurance has paid, List pending insu claims on line 33 of Schedule A/B: Property.	Date of your	Value of property
thin 1 year before you filed for bankrusastar, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Tra	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insu claims on line 33 of Schedule A/B: Property.	Date of your soss	Value of property lost
thin 1 year before you filed for bankrusaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trachin 1 year before you filed for bankrus a consulted about seeking bankruptcy ude any attorneys, bankruptcy petition p	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insu claims on line 33 of Schedule A/B: Property.	Date of your loss stance	Value of property lost
ithin 1 year before you filed for bankrusaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trachin 1 year before you filed for bankruster under any attorneys, bankruptcy petition p	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insu claims on line 33 of Schedule A/B: Property.  Inserts  ptcy, did you or anyone else acting on your behalf pay of preparing a hankruptcy petition?	Date of your loss stance	Value of property lost
thin 1 year before you filed for bankrusaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trainin 1 year before you filed for bankrus consulted about seeking bankruptcy ude any attorneys, bankruptcy petition p  No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insu claims on line 33 of Schedule A/B: Property.  Inserts  ptcy, did you or anyone else acting on your behalf pay of preparing a hankruptcy petition?	Date of your loss stance	Value of property lost  \$ y to anyone
hthin 1 year before you filed for bankrusastar, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trachin 1 year before you filed for bankrust consulted about seeking bankruptcy uple any attorneys, bankruptcy petition p  No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid to be a schedule above the list pending insuctains and line and line and list pending a paid of services required to prepare and list pending a pending agencies for services required to the list pending agencies for services required to the list pending agencies for services required to the list pending insuctains and list pending insuc	Date of your loss wance  or transfer any propert in your bankruptcy.  Date payment or	Value of property lost  \$ y to anyone
thin 1 year before you filed for bankrusaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trainin 1 year before you filed for bankrus consulted about seeking bankruptcy ude any attorneys, bankruptcy petition p  No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid to be a schedule above the list pending insuctains and line and line and list pending a paid of services required to prepare and list pending a pending agencies for services required to the list pending agencies for services required to the list pending agencies for services required to the list pending insuctains and list pending insuc	Date of your stance or transfer any propert d in your bankruptcy.  Date payment or transfer was	Value of property lost  \$ y to anyone
ithin 1 year before you filed for bankrusaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trachin 1 year before you filed for bankruptey uple any attorneys, bankruptcy petition p  No Yes. Fill in the details.  Person Who Was Paid	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid to be a schedule above the list pending insuctains and line and line and list pending a paid of services required to prepare and list pending a pending agencies for services required to the list pending agencies for services required to the list pending agencies for services required to the list pending insuctains and list pending insuc	Date of your stance or transfer any propert d in your bankruptcy.  Date payment or transfer was	Value of property lost  \$ y to anyone
hthin 1 year before you filed for bankrusastar, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trachin 1 year before you filed for bankrust consulted about seeking bankruptcy uple any attorneys, bankruptcy petition p  No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid. List pending insuctains on line 33 of Schedule AB: Property.  Insurance has paid to be a schedule above the list pending insuctains and line and line and list pending a paid of services required to prepare and list pending a pending agencies for services required to the list pending agencies for services required to the list pending agencies for services required to the list pending insuctains and list pending insuc	Date of your stance or transfer any propert d in your bankruptcy.  Date payment or transfer was	Value of property lost

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btor 1		· ·	Manage 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	First Name Middle Name Les	t Name	Case number (#known)_		
		Description and value of any proper	ty transferred	Date payment or	Amount of
		Control of the Contro		transfer was made	payment
	Person Who Was Paid	<b>-</b>	, , ,		
					\$
	Number Street				
		•			\$
		•			-
	City State ZIP Code				
	Oldin Fil (NOD)				
				r	
	Entail or website address			4	
	Person Who Made the Payment, if Not You			\$ !	•
	A disconsission with the Lethinder L.			*	
_	io (es. Fill in the details.				
		Description and value of any property	transferred	Date payment or transfer was	Amount of pay
-	Person Who Was Paid	de the season reason reaches a second to the season reaches	No. of the state o	made	
	Number Street	•		47	\$
					_
,	City State 770 Code		:	***************************************	\$
Withi	City State ZIP Code  7 2 years before you filed for bankrup	tcy, did you sell, trade, or otherwise	transfer any property to	anyone, other tha	\$ n property
Nithi trans nclud Do no	n 2 years before you filed for bankrup ferred in the ordinary course of your b le both outright transfers and transfers m It include gifts and transfers that you hav	pusiness of financial affairs? lade as security (such as the granting e already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	orty), Date transf
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Document Page 50 of 53 TYEASHAY BISHOP Debtor 1 Case number (# know 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a senaficiary? (These are often called asset-protection devices.) DE No Yes. Fill in the details. Description and value of the property transferred Date transfer Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Soxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument ciosed, sold, moved, closing or transfer Name of Financial Institution XXXX-Checking Savings **Humber Street** Money market ☐ Brokersoe ZIP Code Other_ XXXX-☐ Checking Name of Financial Institution Savings Number Street Money market D Brokerage Other_ 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? W No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still ☐ No Name of Financial Institution Q Yes Number Street Number Street City State ZIP Code

CIN

ZIP Code

Case 16-11605

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	First Name	Middle Name	Last Name	Case number (Panown)	
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Have	ýou stored pro	perty in a storag	e unit or place other than your hom	e within 1 year before you filed for bankru	otcy?
D v.	o es. Fill in the di	- 4 - M			•
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			Who else has or had access to	o it? Describe the contents	Do you si
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	Name of Storage Fa	a bala			□ No
	CONTRACTOR OF CONTRACTOR P.S.	KCRRY	Name		Yes
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irt 9:	Identify	Property Vos	Hold or Control for Someone El		
Do yo	by hold or cont lid in trust for s	rol any property	that someone else owns? include a	any property you borrowed from, are storin	g for,
C) No		ю <del>пеоле</del> .	•		
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	Last Name	Case number (#####)	
ave you notified any governmental :	unit of any release of hazardous mater	iai?	
Ino			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
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Name of alta		_	and the second
THE PARTY OF THE P	Governmental unit		
Number Street	Number Street	<del>-</del>	. , }
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ye you been a party in any judicial o	or administrative proceeding under an	y environmental law? include settlement	s and orders.
No	<del>-</del>		
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